

Mississippi Secretary of State
700 North Street P. O. Box 136, Jackson, MS 39205-0136

ADMINISTRATIVE PROCEDURES NOTICE FILING

AGENCY NAME Mississippi Board of Examiners for Licensed Professional Counselors		CONTACT PERSON LeeAnn Mordecai		TELEPHONE NUMBER 601-359-1010	
ADDRESS 239 N. LAMAR STREET, SUITE 402		CITY JACKSON		STATE MS	ZIP 39201
EMAIL LPMordecai@ipc.ms.gov	SUBMIT DATE 8/17/15	Name or number of rule(s): RULE 4.2.C.			

Short explanation of rule/amendment/repeal and reason(s) for proposing rule/amendment/repeal:

Delete Rule 4.2.C. due to conflicting information within rules and need of clarification.

Source: *Miss Code Ann.* § 73-30-7 (6) & 73-30-9 (Rev. 2008)

List all rules repealed, amended, or suspended by the proposed rule: Rule 4.2.C.

ORAL PROCEEDING:

☐ An oral proceeding is scheduled for this rule on Date: _____ Time: _____ Place: _____

☒ Presently, an oral proceeding is not scheduled on this rule.

If an oral proceeding is not scheduled, an oral proceeding must be held if a written request for an oral proceeding is submitted by a political subdivision, an agency or ten (10) or more persons. The written request should be submitted to the agency contact person at the above address within twenty (20) days after the filing of this notice of proposed rule adoption and should include the name, address, email address, and telephone number of the person(s) making the request; and, if you are an agent or attorney, the name, address, email address, and telephone number of the party or parties you represent. At any time within the twenty-five (25) day public comment period, written submissions including arguments, data, and views on the proposed rule/amendment/repeal may be submitted to the filing agency.

ECONOMIC IMPACT STATEMENT:

☒ Economic impact statement not required for this rule. ☐ Concise summary of economic impact statement attached.

TEMPORARY RULES

☒ Original filing
☐ Renewal of effectiveness
 To be in effect in _____ days
 Effective date:
☒ Immediately upon filing
☐ Other (specify): _____

PROPOSED ACTION ON RULES

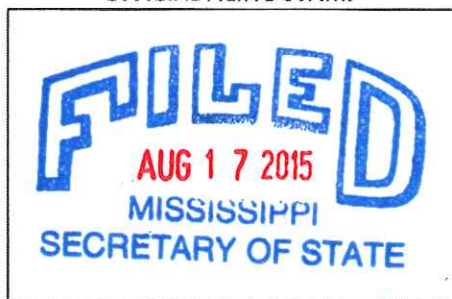
Action proposed:
☐ New rule(s)
☐ Amendment to existing rule(s)
☐ Repeal of existing rule(s)
☐ Adoption by reference
 Proposed final effective date:
☐ 30 days after filing
☐ Other (specify): _____

FINAL ACTION ON RULES

Date Proposed Rule Filed: _____
 Action taken:
☐ Adopted with no changes in text
☐ Adopted with changes
☐ Adopted by reference
☐ Withdrawn
☐ Repeal adopted as proposed
 Effective date:
☐ 30 days after filing
☐ Other (specify): _____

Printed name and Title of person authorized to file rules: LeeAnn Mordecai, Executive Director

Signature of person authorized to file rules: *LeeAnn Mordecai*

OFFICIAL FILING STAMP

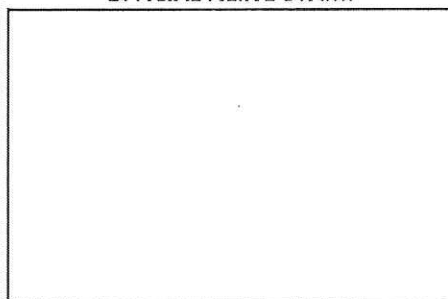
Accepted for filing by

#21448

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The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.